

## UNITED STATES BANKRUPTCY COURT

**NOTICE TO CONSUMER DEBTOR(S) UNDER §342(b)  
OF THE BANKRUPTCY CODE**

In accordance with § 342(b) of the Bankruptcy Code, this notice to individuals with primarily consumer debts: (1) Describes briefly the services available from credit counseling services; (2) Describes briefly the purposes, benefits and costs of the four types of bankruptcy proceedings you may commence; and (3) Informs you about bankruptcy crimes and notifies you that the Attorney General may examine all information you supply in connection with a bankruptcy case.

You are cautioned that bankruptcy law is complicated and not easily described. Thus, you may wish to seek the advice of an attorney to learn of your rights and responsibilities should you decide to file a petition. Court employees cannot give you legal advice.

Notices from the bankruptcy court are sent to the mailing address you list on your bankruptcy petition. In order to ensure that you receive information about events concerning your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address. If you are filing a joint case (a single bankruptcy case for two individuals married to each other), and each spouse lists the same mailing address on the bankruptcy petition, you and your spouse will generally receive a single copy of each notice mailed from the bankruptcy court in a jointly-addressed envelope, unless you file a statement with the court requesting that each spouse receive a separate copy of all notices.

**1. Services Available from Credit Counseling Agencies**

**With limited exceptions, § 109(h) of the Bankruptcy Code requires that all individual debtors who file for bankruptcy relief on or after October 17, 2005, receive a briefing that outlines the available opportunities for credit counseling and provides assistance in performing a budget analysis.** The briefing must be given within 180 days before the bankruptcy filing. The briefing may be provided individually or in a group (including briefings conducted by telephone or on the Internet) and must be provided by a nonprofit budget and credit counseling agency approved by the United States trustee or bankruptcy administrator. The clerk of the bankruptcy court has a list that you may consult of the approved budget and credit counseling agencies. Each debtor in a joint case must complete the briefing.

**In addition, after filing a bankruptcy case, an individual debtor generally must complete a financial management instructional course before he or she can receive a discharge.** The clerk also has a list of approved financial management instructional courses. Each debtor in a joint case must complete the course.

**2. The Four Chapters of the Bankruptcy Code Available to Individual Consumer Debtors****Chapter 7: Liquidation (\$245 filing fee, \$46 administrative fee, \$15 trustee surcharge: Total fee \$306)**

Chapter 7 is designed for debtors in financial difficulty who do not have the ability to pay their existing debts. Debtors whose debts are primarily consumer debts are subject to a "means test" designed to determine whether the case should be permitted to proceed under chapter 7. If your income is greater than the median income for your state of residence and family size, in some cases, the United States trustee (or bankruptcy administrator), the trustee, or creditors have the right to file a motion requesting that the court dismiss your case under § 707(b) of the Code. It is up to the court to decide whether the case should be dismissed.

Under chapter 7, you may claim certain of your property as exempt under governing law. A trustee may have the right to take possession of and sell the remaining property that is not exempt and use the sale proceeds to pay your creditors.

The purpose of filing a chapter 7 case is to obtain a discharge of your existing debts. If, however, you are found to have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your

discharge and, if it does, the purpose for which you filed the bankruptcy petition will be defeated.

Even if you receive a general discharge, some particular debts are not discharged under the law. Therefore, you may still be responsible for most taxes and student loans; debts incurred to pay nondischargeable taxes; domestic support and property settlement obligations; most fines, penalties, forfeitures, and criminal restitution obligations; certain debts which are not properly listed in your bankruptcy papers; and debts for death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs. Also, if a creditor can prove that a debt arose from fraud, breach of fiduciary duty, or theft, or from a willful and malicious injury, the bankruptcy court may determine that the debt is not discharged.

**Chapter 13: Repayment of All or Part of the Debts of an Individual with Regular Income (\$235 filing fee, \$46 administrative fee: Total fee \$281)**

Chapter 13 is designed for individuals with regular income who would like to pay all or part of their debts in installments over a period of time. You are only eligible for chapter 13 if your debts do not exceed certain dollar amounts set forth in the Bankruptcy Code.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, using your future earnings. The period allowed by the court to repay your debts may be three years or five years, depending upon your income and other factors. The court must approve your plan before it can take effect.

After completing the payments under your plan, your debts are generally discharged except for domestic support obligations; most student loans; certain taxes; most criminal fines and restitution obligations; certain debts which are not properly listed in your bankruptcy papers; certain debts for acts that caused death or personal injury; and certain long term secured obligations.

**Chapter 11: Reorganization (\$1000 filing fee, \$46 administrative fee: Total fee \$1046)**

Chapter 11 is designed for the reorganization of a business but is also available to consumer debtors. Its provisions are quite complicated, and any decision by an individual to file a chapter 11 petition should be reviewed with an attorney.

**Chapter 12: Family Farmer or Fisherman (\$200 filing fee, \$46 administrative fee: Total fee \$246)**

Chapter 12 is designed to permit family farmers and fishermen to repay their debts over a period of time from future earnings and is similar to chapter 13. The eligibility requirements are restrictive, limiting its use to those whose income arises primarily from a family-owned farm or commercial fishing operation.

**3. Bankruptcy Crimes and Availability of Bankruptcy Papers to Law Enforcement Officials**

A person who knowingly and fraudulently conceals assets or makes a false oath or statement under penalty of perjury, either orally or in writing, in connection with a bankruptcy case is subject to a fine, imprisonment, or both. All information supplied by a debtor in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the United States Trustee, the Office of the United States Attorney, and other components and employees of the Department of Justice.

**WARNING:** Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information regarding your creditors, assets, liabilities, income, expenses and general financial condition. Your bankruptcy case may be dismissed if this information is not filed with the court within the time deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court. The documents and the deadlines for filing them are listed on Form B200, which is posted at [http://www.uscourts.gov/bkforms/bankruptcy\\_forms.html#procedure](http://www.uscourts.gov/bkforms/bankruptcy_forms.html#procedure).

IN RE:

Case No. 12-13529Webster, Tarris & Webster, Lekia MartinChapter 7

Debtor(s)

**CERTIFICATION OF NOTICE TO CONSUMER DEBTOR(S)  
UNDER § 342(b) OF THE BANKRUPTCY CODE****Certificate of [Non-Attorney] Bankruptcy Petition Preparer**

I, the [non-attorney] bankruptcy petition preparer signing the debtor's petition, hereby certify that I delivered to the debtor the attached notice, as required by § 342(b) of the Bankruptcy Code.

Printed Name and title, if any, of Bankruptcy Petition Preparer  
Address:

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Social Security number (If the bankruptcy petition preparer is not an individual, state the Social Security number of the officer, principal, responsible person, or partner of the bankruptcy petition preparer.)  
(Required by 11 U.S.C. § 110.)

**X**

Signature of Bankruptcy Petition Preparer of officer, principal, responsible person, or partner whose Social Security number is provided above.

**Certificate of the Debtor**

I (We), the debtor(s), affirm that I (we) have received and read the attached notice, as required by § 342(b) of the Bankruptcy Code.

Webster, Tarris & Webster, Lekia Martin

Printed Name(s) of Debtor(s)

**X /s/ Tarris Webster**

Signature of Debtor

**9/10/2012**

Date

Case No. (if known) 12-13529**X /s/ Lekia Martin Webster**

Signature of Joint Debtor (if any)

**9/10/2012**

Date

**Instructions:** Attach a copy of Form B 201A, Notice to Consumer Debtor(s) Under § 342(b) of the Bankruptcy Code.

Use this form to certify that the debtor has received the notice required by 11 U.S.C. § 342(b) **only** if the certification has **NOT** been made on the Voluntary Petition, Official Form B1. Exhibit B on page 2 of Form B1 contains a certification by the debtor's attorney that the attorney has given the notice to the debtor. The Declarations made by debtors and bankruptcy petition preparers on page 3 of Form B1 also include this certification.

IN RE:

Case No. 12-13529

Webster, Tarris & Webster, Lekia Martin

Chapter 7

Debtor(s)

### SUMMARY OF SCHEDULES

Indicate as to each schedule whether that schedule is attached and state the number of pages in each. Report the totals from Schedules A, B, D, E, F, I, and J in the boxes provided. Add the amounts from Schedules A and B to determine the total amount of the debtor's assets. Add the amounts of all claims from Schedules D, E, and F to determine the total amount of the debtor's liabilities. Individual debtors also must complete the "Statistical Summary of Certain Liabilities and Related Data" if they file a case under chapter 7, 11, or 13.

NAME OF SCHEDULE	ATTACHED (YES/NO)	NUMBER OF SHEETS	ASSETS	LIABILITIES	OTHER
A - Real Property	Yes	1	\$ 0.00		
B - Personal Property	Yes	3	\$ 26,820.00		
C - Property Claimed as Exempt	Yes	1			
D - Creditors Holding Secured Claims	Yes	1		\$ 4,999.00	
E - Creditors Holding Unsecured Priority Claims (Total of Claims on Schedule E)	Yes	2		\$ 67.00	
F - Creditors Holding Unsecured Nonpriority Claims	Yes	7		\$ 17,110.00	
G - Executory Contracts and Unexpired Leases	Yes	1			
H - Codebtors	Yes	1			
I - Current Income of Individual Debtor(s)	Yes	2			\$ 2,535.51
J - Current Expenditures of Individual Debtor(s)	Yes	1			\$ 3,148.00
TOTAL		20	\$ 26,820.00	\$ 22,176.00	

IN RE:

Case No. 12-13529Webster, Tarris & Webster, Lekia MartinChapter 7

Debtor(s)

**STATISTICAL SUMMARY OF CERTAIN LIABILITIES AND RELATED DATA (28 U.S.C. § 159)**

If you are an individual debtor whose debts are primarily consumer debts, as defined in § 101(8) of the Bankruptcy Code (11 U.S.C. § 101(8)), filing a case under chapter 7, 11 or 13, you must report all information requested below.

Check this box if you are an individual debtor whose debts are NOT primarily consumer debts. You are not required to report any information here.

**This information is for statistical purposes only under 28 U.S.C. § 159.**

**Summarize the following types of liabilities, as reported in the Schedules, and total them.**

Type of Liability	Amount
Domestic Support Obligations (from Schedule E)	\$ <b>67.00</b>
Taxes and Certain Other Debts Owed to Governmental Units (from Schedule E)	\$ <b>0.00</b>
Claims for Death or Personal Injury While Debtor Was Intoxicated (from Schedule E) (whether disputed or undisputed)	\$ <b>0.00</b>
Student Loan Obligations (from Schedule F)	\$ <b>500.00</b>
Domestic Support, Separation Agreement, and Divorce Decree Obligations Not Reported on Schedule E	\$ <b>0.00</b>
Obligations to Pension or Profit-Sharing, and Other Similar Obligations (from Schedule F)	\$ <b>0.00</b>
<b>TOTAL</b>	\$ <b>567.00</b>

**State the following:**

Average Income (from Schedule I, Line 16)	\$ <b>2,535.51</b>
Average Expenses (from Schedule J, Line 18)	\$ <b>3,148.00</b>
Current Monthly Income (from Form 22A Line 12; <b>OR</b> , Form 22B Line 11; <b>OR</b> , Form 22C Line 20 )	\$ <b>3,433.02</b>

**State the following:**

1. Total from Schedule D, "UNSECURED PORTION, IF ANY" column	\$ <b>3,749.00</b>
2. Total from Schedule E, "AMOUNT ENTITLED TO PRIORITY" column.	\$ <b>67.00</b>
3. Total from Schedule E, "AMOUNT NOT ENTITLED TO PRIORITY, IF ANY" column	\$ <b>0.00</b>
4. Total from Schedule F	\$ <b>17,110.00</b>
5. Total of non-priority unsecured debt (sum of 1, 3, and 4)	\$ <b>20,859.00</b>

**SCHEDULE A - REAL PROPERTY**

Except as directed below, list all real property in which the debtor has any legal, equitable, or future interest, including all property owned as a cotenant, community property, or in which the debtor has a life estate. Include any property in which the debtor holds rights and powers exercisable for the debtor's own benefit. If the debtor is married, state whether the husband, wife, both, or the marital community own the property by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community." If the debtor holds no interest in real property, write "None" under "Description and Location of Property."

**Do not include interests in executory contracts and unexpired leases on this schedule. List them in Schedule G - Executory Contracts and Unexpired Leases.**

If an entity claims to have a lien or hold a secured interest in any property, state the amount of the secured claim. See Schedule D. If no entity claims to hold a secured interest in the property, write "None" in the column labeled "Amount of Secured Claim."

If the debtor is an individual or if a joint petition is filed, state the amount of any exemption claimed in the property only in Schedule C - Property Claimed as Exempt.

DESCRIPTION AND LOCATION OF PROPERTY	NATURE OF DEBTOR'S INTEREST IN PROPERTY	HUSBAND, WIFE, JOINT, OR COMMUNITY	CURRENT VALUE OF DEBTOR'S INTEREST IN PROPERTY WITHOUT DEDUCTING ANY SECURED CLAIM OR EXEMPTION	AMOUNT OF SECURED CLAIM
<b>None</b>				
				<b>TOTAL</b> <b>0.00</b>

(Report also on Summary of Schedules)

**SCHEDULE B - PERSONAL PROPERTY**

Except as directed below, list all personal property of the debtor of whatever kind. If the debtor has no property in one or more of the categories, place an "x" in the appropriate position in the column labeled "None." If additional space is needed in any category, attach a separate sheet properly identified with the case name, case number, and the number of the category. If the debtor is married, state whether the husband, wife, both, or the marital community own the property by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community." If the debtor is an individual or a joint petition is filed, state the amount of any exemptions claimed only in Schedule C - Property Claimed as Exempt.

**Do not list interests in executory contracts and unexpired leases on this schedule. List them in Schedule G - Executory Contracts and Unexpired Leases.**

If the property is being held for the debtor by someone else, state that person's name and address under "Description and Location of Property." If the property is being held for a minor child, simply state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

TYPE OF PROPERTY	N O N E	DESCRIPTION AND LOCATION OF PROPERTY	HUSBAND, WIFE, JOINT, OR COMMUNITY	CURRENT VALUE OF DEBTOR'S INTEREST IN PROPERTY WITHOUT DEDUCTING ANY SECURED CLAIM OR EXEMPTION
1. Cash on hand.	X			
2. Checking, savings or other financial accounts, certificates of deposit or shares in banks, savings and loan, thrift, building and loan, and homestead associations, or credit unions, brokerage houses, or cooperatives.	X			
3. Security deposits with public utilities, telephone companies, landlords, and others.	X			
4. Household goods and furnishings, include audio, video, and computer equipment.		<b>14kt Ring</b> <b>2 panasonic DVD players</b> <b>20 piece Craftsman tool set</b> <b>27" TV</b> <b>32" Emerson TV</b> <b>32" Sanyo TV</b> <b>35" Sanyo TV</b> <b>42" Sanyo TV</b> <b>Apple ipod</b> <b>Dell Desktop computer with printer</b> <b>Gas Weedeater</b> <b>GPS system</b> <b>Kodak digital camera</b> <b>Miscellaneous Household Goods and Furnishings</b> <b>Necklace</b> <b>Nintendo DSI</b> <b>Nintendo Wii with 5 games</b> <b>Panasonic CD changer</b> <b>Push Lawnmower</b>	J	<b>75.00</b> <b>30.00</b> <b>50.00</b> <b>30.00</b> <b>40.00</b> <b>40.00</b> <b>40.00</b> <b>45.00</b> <b>50.00</b> <b>200.00</b> <b>50.00</b> <b>100.00</b> <b>20.00</b> <b>1,500.00</b> <b>75.00</b> <b>70.00</b> <b>100.00</b> <b>30.00</b> <b>75.00</b>
5. Books, pictures and other art objects, antiques, stamp, coin, record, tape, compact disc, and other collections or collectibles.	X			
6. Wearing apparel.	X			
7. Furs and jewelry.	X			

**SCHEDULE B - PERSONAL PROPERTY**  
**(Continuation Sheet)**

TYPE OF PROPERTY	N O N E	DESCRIPTION AND LOCATION OF PROPERTY	HUSBAND, WIFE, JOINT, OR COMMUNITY	CURRENT VALUE OF DEBTOR'S INTEREST IN PROPERTY WITHOUT DEDUCTING ANY SECURED CLAIM OR EXEMPTION	
8. Firearms and sports, photographic, and other hobby equipment.	X				
9. Interest in insurance policies. Name insurance company of each policy and itemize surrender or refund value of each.	X				
10. Annuities. Itemize and name each issue.	X				
11. Interests in an education IRA as defined in 26 U.S.C. § 530(b)(1) or under a qualified State tuition plan as defined in 26 U.S.C. § 529(b)(1). Give particulars. (File separately the record(s) of any such interest(s). 11 U.S.C. § 521(c).)	X				
12. Interests in IRA, ERISA, Keogh, or other pension or profit sharing plans. Give particulars.		<b>401k - Lekia</b> <b>401k - Tarris</b>	J	<b>1,250.00</b>	
13. Stock and interests in incorporated and unincorporated businesses. Itemize.	X		J	<b>450.00</b>	
14. Interests in partnerships or joint ventures. Itemize.	X				
15. Government and corporate bonds and other negotiable and non-negotiable instruments.	X				
16. Accounts receivable.	X				
17. Alimony, maintenance, support, and property settlements in which the debtor is or may be entitled. Give particulars.	X				
18. Other liquidated debts owed to debtor including tax refunds. Give particulars.		<b>Tax Refunds - EIC</b> <b>Tax Refunds - Federal</b> <b>Tax Refunds - State</b>	J	<b>5,000.00</b> <b>5,000.00</b> <b>5,000.00</b>	
19. Equitable or future interest, life estates, and rights or powers exercisable for the benefit of the debtor other than those listed in Schedule A - Real Property.	X		J		
20. Contingent and noncontingent interests in estate of a decedent, death benefit plan, life insurance policy, or trust.	X				
21. Other contingent and unliquidated claims of every nature, including tax refunds, counterclaims of the debtor, and rights to setoff claims. Give estimated value of each.	X				
22. Patents, copyrights, and other intellectual property. Give particulars.	X				
23. Licenses, franchises, and other general intangibles. Give particulars.	X				

**SCHEDULE B - PERSONAL PROPERTY  
(Continuation Sheet)**

0 continuation sheets attached

(Include amounts from any continuation sheets attached.  
Report total also on Summary of Schedules.)

**SCHEDULE C - PROPERTY CLAIMED AS EXEMPT**

Debtor elects the exemptions to which debtor is entitled under:  
(Check one box)

11 U.S.C. § 522(b)(2)  
 11 U.S.C. § 522(b)(3)

Check if debtor claims a homestead exemption that exceeds \$146,450. \*

DESCRIPTION OF PROPERTY	SPECIFY LAW PROVIDING EACH EXEMPTION	VALUE OF CLAIMED EXEMPTION	CURRENT VALUE OF PROPERTY WITHOUT DEDUCTING EXEMPTIONS
<b><u>SCHEDULE B - PERSONAL PROPERTY</u></b>			
14kt Ring	MCA § 85-3-23	75.00	75.00
2 panasonic DVD players	MCA § 85-3-1(a)(i), (ii), (iii), (iv), (v),(vi)	30.00	30.00
20 piece Craftsman tool set	MCA § 85-3-1(a)(i), (ii), (iii), (iv), (v),(vi)	50.00	50.00
27" TV	MCA § 85-3-1(a)(i), (ii), (iii), (iv), (v),(vi)	30.00	30.00
32" Emerson TV	MCA § 85-3-1(a)(i), (ii), (iii), (iv), (v),(vi)	40.00	40.00
32" Sanyo TV	MCA § 85-3-1(a)(i), (ii), (iii), (iv), (v),(vi)	40.00	40.00
35" Sanyo TV	MCA § 85-3-1(a)(i), (ii), (iii), (iv), (v),(vi)	40.00	40.00
42" Sanyo TV	MCA § 85-3-1(a)(i), (ii), (iii), (iv), (v),(vi)	45.00	45.00
Apple ipod	MCA § 85-3-1(a)(i), (ii), (iii), (iv), (v),(vi)	50.00	50.00
Dell Desktop computer with printer	MCA § 85-3-1(a)(i), (ii), (iii), (iv), (v),(vi)	200.00	200.00
Gas Weedeater	MCA § 85-3-1(a)(i), (ii), (iii), (iv), (v),(vi)	50.00	50.00
GPS system	MCA § 85-3-1(a)(i), (ii), (iii), (iv), (v),(vi)	100.00	100.00
Kodak digital camera	MCA § 85-3-1(a)(i), (ii), (iii), (iv), (v),(vi)	20.00	20.00
Miscellaneous Household Goods and Furnishings	MCA § 85-3-1(a)(i), (ii), (iii), (iv), (v),(vi)	1,500.00	1,500.00
Necklace	MCA § 85-3-23	75.00	75.00
Nintendo DSI	MCA § 85-3-1(a)(i), (ii), (iii), (iv), (v),(vi)	70.00	70.00
Nintendo Wii with 5 games	MCA § 85-3-1(a)(i), (ii), (iii), (iv), (v),(vi)	100.00	100.00
Panasonic CD changer	MCA § 85-3-1(a)(i), (ii), (iii), (iv), (v),(vi)	30.00	30.00
Push Lawnmower	MCA § 85-3-1(a)(i), (ii), (iii), (iv), (v),(vi)	75.00	75.00
401k - Lekia	MCA § 85-3-1(c)(i)	1,250.00	1,250.00
401k - Tarris	MCA § 85-3-1(c)(i)	450.00	450.00
Tax Refunds - EIC	MCA § 85-3-1(h)	5,000.00	5,000.00
Tax Refunds - Federal	MCA § 85-3-1(i)	5,000.00	5,000.00
Tax Refunds - State	MCA § 85-3-1(j)	5,000.00	5,000.00
1996 GMC Sonoma	MCA § 85-3-1(a)(i), (ii), (iii), (iv), (v),(vi)	2,000.00	2,000.00
2006 Hyundai Elantra	MCA § 85-3-1(a)(i), (ii), (iii), (iv), (v),(vi)	5,500.00	5,500.00

**SCHEDULE D - CREDITORS HOLDING SECURED CLAIMS**

State the name, mailing address, including zip code, and last four digits of any account number of all entities holding claims secured by property of the debtor as of the date of filing of the petition. The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. List creditors holding all types of secured interests such as judgment liens, garnishments, statutory liens, mortgages, deeds of trust, and other security interests.

List creditors in alphabetical order to the extent practicable. If a minor child is the creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m). If all secured creditors will not fit on this page, use the continuation sheet provided.

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor," include the entity on the appropriate schedule of creditors, and complete Schedule H - Codebtors. If a joint petition is filed, state whether the husband, wife, both of them, or the marital community may be liable on each claim by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community."

If the claim is contingent, place an "X" in the column labeled "Contingent." If the claim is unliquidated, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Disputed." (You may need to place an "X" in more than one of these three columns.)

Total the columns labeled "Amount of Claim Without Deducting Value of Collateral" and "Unsecured Portion, if Any" in the boxes labeled "Total(s)" on the last sheet of the completed schedule. Report the total from the column labeled "Amount of Claim Without Deducting Value of Collateral" also on the Summary of Schedules and, if the debtor is an individual with primarily consumer debts, report the total from the column labeled "Unsecured Portion, if Any" on the Statistical Summary of Certain Liabilities and Related Data.

Check this box if debtor has no creditors holding secured claims to report on this Schedule D.

CREDITOR'S NAME AND MAILING ADDRESS INCLUDING ZIP CODE AND ACCOUNT NUMBER. <i>(See Instructions Above.)</i>	CODEBTOR HUSBAND, WIFE, JOINT, OR COMMUNITY	DATE CLAIM WAS INCURRED, NATURE OF LIEN, AND DESCRIPTION AND VALUE OF PROPERTY SUBJECT TO LIEN	AMOUNT OF CLAIM WITHOUT DEDUCTING VALUE OF COLLATERAL			UNSECURED PORTION, IF ANY
			CONTINGENT	UNLIQUIDATED	DISPUTED	
ACCOUNT NO. <b>5069</b>  <b>Title Cash</b> <b>1544 Hwy 1 S</b> <b>Greenville, MS 38701</b>	<b>J</b>	<b>Title Loan on 2006 Hyundai Elantra -</b>  <b>VALUE \$ 5,500.00</b>				<b>1,250.00</b>
ACCOUNT NO. <b>3452</b>  <b>TOWER LOAN</b> <b>POB 320001</b> <b>FLOWOOD, MS 39232</b>		<b>INSTALLMENT ACCOUNT OPENED 4/12</b> <b>(Refinance of old account)</b>  <b>VALUE \$ 1,500.00</b>				<b>3,749.00</b>
ACCOUNT NO.  <b>Tower Loan Of Greenville</b> <b>PO Box 1881</b> <b>Greenville, MS 38702-1881</b>		<b>Assignee or other notification for:</b> <b>TOWER LOAN</b>  <b>VALUE \$</b>				
ACCOUNT NO.		  <b>VALUE \$</b>				
<b>0</b> continuation sheets attached			Subtotal (Total of this page)	\$ <b>4,999.00</b>	\$ <b>3,749.00</b>	
			Total (Use only on last page)	\$ <b>4,999.00</b>	\$ <b>3,749.00</b>	
			(Report also on Summary of Schedules.)	(If applicable, report also on Statistical Summary of Certain Liabilities and Related Data.)		

**SCHEDULE E - CREDITORS HOLDING UNSECURED PRIORITY CLAIMS**

A complete list of claims entitled to priority, listed separately by type of priority, is to be set forth on the sheets provided. Only holders of unsecured claims entitled to priority should be listed in this schedule. In the boxes provided on the attached sheets, state the name, mailing address, including zip code, and last four digits of the account number, if any, of all entities holding priority claims against the debtor or the property of the debtor, as of the date of the filing of the petition. Use a separate continuation sheet for each type of priority and label each with the type of priority.

The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. If a minor child is a creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor," include the entity on the appropriate schedule of creditors, and complete Schedule H-Codebtors. If a joint petition is filed, state whether the husband, wife, both of them, or the marital community may be liable on each claim by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community." If the claim is contingent, place an "X" in the column labeled "Contingent." If the claim is unliquidated, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Disputed." (You may need to place an "X" in more than one of these three columns.)

Report the total of claims listed on each sheet in the box labeled "Subtotals" on each sheet. Report the total of all claims listed on this Schedule E in the box labeled "Total" on the last sheet of the completed schedule. Report this total also on the Summary of Schedules.

Report the total of amounts entitled to priority listed on each sheet in the box labeled "Subtotals" on each sheet. Report the total of all amounts entitled to priority listed on this Schedule E in the box labeled "Totals" on the last sheet of the completed schedule. Individual debtors with primarily consumer debts report this total also on the Statistical Summary of Certain Liabilities and Related Data.

Report the total of amounts not entitled to priority listed on each sheet in the box labeled "Subtotals" on each sheet. Report the total of all amounts not entitled to priority listed on this Schedule E in the box labeled "Totals" on the last sheet of the completed schedule. Individual debtors with primarily consumer debts report this total also on the Statistical Summary of Certain Liabilities and Related Data.

Check this box if debtor has no creditors holding unsecured priority claims to report on this Schedule E.

**TYPES OF PRIORITY CLAIMS** (Check the appropriate box(es) below if claims in that category are listed on the attached sheets) **Domestic Support Obligations**

Claims for domestic support that are owed to or recoverable by a spouse, former spouse, or child of the debtor, or the parent, legal guardian, or responsible relative of such a child, or a governmental unit to whom such a domestic support claim has been assigned to the extent provided in 11 U.S.C. § 507(a)(1).

 **Extensions of credit in an involuntary case**

Claims arising in the ordinary course of the debtor's business or financial affairs after the commencement of the case but before the earlier of the appointment of a trustee or the order for relief. 11 U.S.C. § 507(a)(3).

 **Wages, salaries, and commissions**

Wages, salaries, and commissions, including vacation, severance, and sick leave pay owing to employees and commissions owing to qualifying independent sales representatives up to \$11,725\* per person earned within 180 days immediately preceding the filing of the original petition, or the cessation of business, whichever occurred first, to the extent provided in 11 U.S.C. § 507(a)(4).

 **Contributions to employee benefit plans**

Money owed to employee benefit plans for services rendered within 180 days immediately preceding the filing of the original petition, or the cessation of business, whichever occurred first, to the extent provided in 11 U.S.C. § 507(a)(5).

 **Certain farmers and fishermen**

Claims of certain farmers and fishermen, up to \$5,775\* per farmer or fisherman, against the debtor, as provided in 11 U.S.C. § 507(a)(6).

 **Deposits by individuals**

Claims of individuals up to \$2,600\* for deposits for the purchase, lease, or rental of property or services for personal, family, or household use, that were not delivered or provided. 11 U.S.C. § 507(a)(7).

 **Taxes and Certain Other Debts Owed to Governmental Units**

Taxes, customs duties, and penalties owing to federal, state, and local governmental units as set forth in 11 U.S.C. § 507(a)(8).

 **Commitments to Maintain the Capital of an Insured Depository Institution**

Claims based on commitments to the FDIC, RTC, Director of the Office of Thrift Supervision, Comptroller of the Currency, or Board of Governors of the Federal Reserve System, or their predecessors or successors, to maintain the capital of an insured depository institution. 11 U.S.C. § 507(a)(9).

 **Claims for Death or Personal Injury While Debtor Was Intoxicated**

Claims for death or personal injury resulting from the operation of a motor vehicle or vessel while the debtor was intoxicated from using alcohol, a drug, or another substance. 11 U.S.C. § 507(a)(10).

\* Amounts are subject to adjustment on 4/01/13, and every three years thereafter with respect to cases commenced on or after the date of adjustment.

**SCHEDULE E - CREDITORS HOLDING UNSECURED PRIORITY CLAIMS**  
**(Continuation Sheet)**

**Domestic Support Obligations**

(Type of Priority for Claims Listed on This Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE AND ACCOUNT NUMBER. <i>(See Instructions above.)</i>	CODEBTOR HUSBAND, WIFE, JOINT, OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM	AMOUNT ENTITLED TO PRIORITY	AMOUNT NOT ENTITLED TO PRIORITY, IF ANY
ACCOUNT NO. <b>MS Dept Of Human Services Centralized Recipting And Disbursement PO Box 4301 Jackson, MS 39296-4301</b>		<b>ongoing monthly DSO - deducted from paycheck</b>				<b>67.00</b>	<b>67.00</b>	
ACCOUNT NO. <b>MSDHS/METSS 750 NORTH STATE ST JACKSON, MS 39202</b>		<b>Assignee or other notification for: MS Dept Of Human Services</b>						
ACCOUNT NO.								
ACCOUNT NO.								
ACCOUNT NO.								
ACCOUNT NO.								
Sheet no. <b>1</b> of <b>1</b> continuation sheets attached to Schedule of Creditors Holding Unsecured Priority Claims			Subtotal (Totals of this page)	\$ <b>67.00</b>	\$ <b>67.00</b>	\$		
			Total					
				\$ <b>67.00</b>				
			Total					
			(Use only on last page of the completed Schedule E. Report also on the Summary of Schedules.)					
			Total (Use only on last page of the completed Schedule E. If applicable, report also on the Statistical Summary of Certain Liabilities and Related Data.)					
				\$ <b>67.00</b>		\$		

**SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS**

State the name, mailing address, including zip code, and last four digits of any account number, of all entities holding unsecured claims without priority against the debtor or the property of the debtor, as of the date of filing of the petition. The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. If a minor child is a creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m). Do not include claims listed in Schedules D and E. If all creditors will not fit on this page, use the continuation sheet provided.

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor," include the entity on the appropriate schedule of creditors, and complete Schedule H - Codebtors. If a joint petition is filed, state whether the husband, wife, both of them, or the marital community may be liable on each claim by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community."

If the claim is contingent, place an "X" in the column labeled "Contingent." If the claim is unliquidated, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Disputed." (You may need to place an "X" in more than one of these three columns.)

Report the total of all claims listed on this schedule in the box labeled "Total" on the last sheet of the completed schedule. Report this total also on the Summary of Schedules and, if the debtor is an individual with primarily consumer debts, report this total also on the Statistical Summary of Certain Liabilities and Related Data.

Check this box if debtor has no creditors holding unsecured nonpriority claims to report on this Schedule F.

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER. <i>(See Instructions Above.)</i>	CODEBTOR HUSBAND, WIFE, JOINT, OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
ACCOUNT NO. <b>American Arbitration Assoc. 1633 Broadway, 10th Floor New York, NY 10019</b>	J	<b>Notice Only</b>				<b>0.00</b>
ACCOUNT NO. <b>Chexsystems Customer Relations 7805 Hudson Rd #100 Saint Paul, MN 55125</b>		<b>Notice Only</b>				<b>0.00</b>
ACCOUNT NO. <b>ALL</b> <b>Delta Regional Medical Center Bankruptcy Notice - ALL Accounts PO Box 1707 Greenville, MS 38704-1707</b>	J	<b>Medical Bills</b>				<b>6,038.00</b>
ACCOUNT NO. <b>Healthcare Fin Svcs FBO DRMC 911 Flynt Drive Flowood, MS 39232-9572</b>		<b>Assignee or other notification for: Delta Regional Medical Center</b>				
			<b>Subtotal (Total of this page)</b>	<b>\$ 6,038.00</b>		
			<b>Total</b> (Use only on last page of the completed Schedule F. Report also on the Summary of Schedules and, if applicable, on the Statistical Summary of Certain Liabilities and Related Data.)	\$		

6 continuation sheets attached

**SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS**  
**(Continuation Sheet)**

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER. <i>(See Instructions Above.)</i>	CODEBTOR HUSBAND, WIFE, JOINT, OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE	AMOUNT OF CLAIM		
			CONTINGENT	UNLIQUIDATED	DISPUTED
ACCOUNT NO. <b>Jeptha F Barbour IV FBO HFS/Delta Regional Medical Center 441 Northpark Dr Ste C Ridgeland, MS 39157-5136</b>		Assignee or other notification for: <b>Delta Regional Medical Center</b>			
ACCOUNT NO. <b>Washington County Circuit Clerk 2012-0285 CO P. O. Box 1276 Greenville, MS 38701-3752</b>		Assignee or other notification for: <b>Delta Regional Medical Center</b>			
ACCOUNT NO. <b>Discount Cash Advance 1513A Highway 1 S Greenville, MS 38701-7143</b>	J	<b>Check Cashing Advance</b>			<b>120.00</b>
ACCOUNT NO. <b>Equifax Information Services PO Box 740256 Atlanta, GA 30374</b>	J	<b>Notice Only</b>			<b>0.00</b>
ACCOUNT NO. <b>Experian PO Box 2002 Allen, TX 75013</b>	J	<b>Notice Only</b>			<b>0.00</b>
ACCOUNT NO. <b>0001</b> <b>FED LOAN SERV PO BOX 69184 HARRISBURG, PA 17106</b>	W	<b>Student Loan ACCOUNT OPENED 8/11</b>			<b>500.00</b>
ACCOUNT NO. <b>7066</b> <b>HEALTHCARE FINANCIAL S 911 FLYNT DR FLOWOOD, MS 39232</b>	H	<b>OPEN ACCOUNT OPENED 7/09 -Collection account for Medical Bill for Dr. William Bracken DO - DPP #2</b>			<b>288.00</b>
Sheet no. <b>1</b> of <b>6</b> continuation sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims			Subtotal (Total of this page)	\$	<b>908.00</b>
			Total		
			(Use only on last page of the completed Schedule F. Report also on the Summary of Schedules, and if applicable, on the Statistical Summary of Certain Liabilities and Related Data.)		
				\$	

**SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS**  
**(Continuation Sheet)**

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER. <i>(See Instructions Above.)</i>	CODEBTOR HUSBAND, WIFE, JOINT, OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE	AMOUNT OF CLAIM		
			CONTINGENT	UNLIQUIDATED	DISPUTED
ACCOUNT NO. <b>Delta Phys. Practices #2 PO Box 1734 Greenville, MS 38704-4739</b>		<b>Assignee or other notification for: HEALTHCARE FINANCIAL S</b>			
ACCOUNT NO. <b>2532</b> <b>HEALTHCARE FINANCIAL S 911 FLYNT DR FLOWOOD, MS 39232</b>	<b>W</b>	<b>OPEN ACCOUNT OPENED 5/12 -Collection account for Medical Bill - for Dr. Michael Trotter MD / DPP#2</b>			<b>149.00</b>
ACCOUNT NO. <b>Delta Phys. Practices #2 PO Box 1734 Greenville, MS 38704-4739</b>		<b>Assignee or other notification for: HEALTHCARE FINANCIAL S</b>			
ACCOUNT NO. <b>5304</b> <b>HEALTHCARE FINANCIAL S 911 FLYNT DR FLOWOOD, MS 39232</b>	<b>H</b>	<b>OPEN ACCOUNT OPENED 2/10 - Collection account for Medical Bill for Dr. Clide Sherrod MD / DPP # 2</b>			<b>110.00</b>
ACCOUNT NO. <b>Delta Phys. Practices #2 PO Box 1734 Greenville, MS 38704-4739</b>		<b>Assignee or other notification for: HEALTHCARE FINANCIAL S</b>			
ACCOUNT NO. <b>5032</b> <b>HEALTHCARE FINANCIAL S 911 FLYNT DR FLOWOOD, MS 39232</b>	<b>W</b>	<b>OPEN ACCOUNT OPENED 3/10 Collection account for Medical Bill for Dr. Richard Smith / DPP #3</b>			<b>100.00</b>
ACCOUNT NO. <b>Delta Phys. Practices #3 PO Box 1734 Greenville, MS 38704-4739</b>		<b>Assignee or other notification for: HEALTHCARE FINANCIAL S</b>			
Sheet no. <u>2</u> of <u>6</u> continuation sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims			Subtotal (Total of this page)	\$	<b>359.00</b>
			Total (Use only on last page of the completed Schedule F. Report also on the Summary of Schedules, and if applicable, on the Statistical Summary of Certain Liabilities and Related Data.)	\$	

**SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS**  
**(Continuation Sheet)**

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER. <i>(See Instructions Above.)</i>	CODEBTOR HUSBAND, WIFE, JOINT, OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE	AMOUNT OF CLAIM		
			CONTINGENT	UNLIQUIDATED	DISPUTED
ACCOUNT NO. <b>2102</b>  <b>HEALTHCARE FINANCIAL S</b> <b>911 FLYNT DR</b> <b>FLOWOOD, MS 39232</b>	H	<b>OPEN ACCOUNT OPENED 1/09 Collection account for Medical Bill for Sheriff S Andrews MD, / DPP #2</b>			<b>97.00</b>
ACCOUNT NO.  <b>Delta Phys. Practices #2</b> <b>PO Box 1734</b> <b>Greenville, MS 38704-4739</b>		Assignee or other notification for: <b>HEALTHCARE FINANCIAL S</b>			
ACCOUNT NO. <b>9679</b>  <b>HEALTHCARE FINANCIAL S</b> <b>911 FLYNT DR</b> <b>FLOWOOD, MS 39232</b>	H	<b>OPEN ACCOUNT OPENED 10/08 Collection account for Medical Bill- for Marilyn McCleod MD/ DPP#2</b>			<b>42.00</b>
ACCOUNT NO.  <b>Delta Phys. Practices #2</b> <b>PO Box 1734</b> <b>Greenville, MS 38704-4739</b>		Assignee or other notification for: <b>HEALTHCARE FINANCIAL S</b>			
ACCOUNT NO. <b>0554</b>  <b>HEALTHCARE FINANCIAL S</b> <b>911 FLYNT DR</b> <b>FLOWOOD, MS 39232</b>	H	<b>OPEN ACCOUNT OPENED 9/08 Collection account for Medical Bill - for Robert Olivier MD - DPP#3</b>			<b>7.00</b>
ACCOUNT NO.  <b>Delta Phys. Practices #3</b> <b>PO Box 1734</b> <b>Greenville, MS 38704-4739</b>		Assignee or other notification for: <b>HEALTHCARE FINANCIAL S</b>			
ACCOUNT NO. <b>6225</b>  <b>HFS SVCS</b> <b>911 FLYNT DR</b> <b>FLOWOOD, MS 39232</b>	H				<b>583.00</b>
Sheet no. <u>3</u> of <u>6</u> continuation sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims			Subtotal (Total of this page)	\$	<b>729.00</b>
			Total (Use only on last page of the completed Schedule F. Report also on the Summary of Schedules, and if applicable, on the Statistical Summary of Certain Liabilities and Related Data.)	\$	

**SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS**  
**(Continuation Sheet)**

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER. <i>(See Instructions Above.)</i>	CODEBTOR HUSBAND, WIFE, JOINT, OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE	AMOUNT OF CLAIM		
			CONTINGENT	UNLIQUIDATED	DISPUTED
ACCOUNT NO.		J <b>Notice Only</b>			
<b>IRS Centralized Insolvency Operations</b> <b>PO BOX 7346</b> <b>Philadelphia, PA 19101-7346</b>					<b>0.00</b>
ACCOUNT NO.		Assignee or other notification for: <b>IRS Centralized Insolvency Operations</b>			
<b>Internal Revenue Service</b> <b>Special Procedure Staff</b> <b>100 W Capitol St Stop 18</b> <b>Jackson, MS 39269-1620</b>					
ACCOUNT NO.		Assignee or other notification for: <b>IRS Centralized Insolvency Operations</b>			
<b>US Attorney</b> <b>FBO IRS</b> <b>900 Jefferson Ave.</b> <b>Oxford, MS 38655-3608</b>					
ACCOUNT NO.		J <b>Notice Only</b>			
<b>JAMS</b> <b>1920 Main Street #300</b> <b>Foothill Ranch, CA 92614</b>					<b>0.00</b>
ACCOUNT NO.		<b>Notice Only</b>			
<b>MS State Tax Comm</b> <b>Bankruptcy Section</b> <b>PO Box 22808</b> <b>Jackson, MS 39225</b>					<b>0.00</b>
ACCOUNT NO. <b>5495</b>		J <b>INSTALLMENT ACCOUNT OPENED 9/11</b>			
<b>ONEMAIN FINANCIAL</b> <b>PO BOX 499</b> <b>HANOVER, MD 21076</b>					<b>7,544.00</b>
ACCOUNT NO. <b>604</b>		J <b>Collection account for Medical Bill</b>			
<b>Patient Accounts Bureau</b> <b>FBO Univ Of MS Medical Center</b> <b>PO Box 279</b> <b>Norcross, GA 30091-0279</b>					<b>500.00</b>
Sheet no. <b>4</b> of <b>6</b> continuation sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims			Subtotal (Total of this page)	\$	<b>8,044.00</b>
			Total		
			(Use only on last page of the completed Schedule F. Report also on the Summary of Schedules, and if applicable, on the Statistical Summary of Certain Liabilities and Related Data.)		
				\$	

**SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS**  
**(Continuation Sheet)**

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER. <i>(See Instructions Above.)</i>	CODEBTOR HUSBAND, WIFE, JOINT, OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE	AMOUNT OF CLAIM		
			CONTINGENT	UNLIQUIDATED	DISPUTED
ACCOUNT NO. <b>0275</b>  <b>REGIONS BANK</b> <b>PO BOX 11007</b> <b>BIRMINGHAM, AL 35288</b>	W	REVOLVING ACCOUNT OPENED 5/11			
ACCOUNT NO. <b>7905</b>  <b>Smith Rouchon</b> <b>1456 Ellis Ave</b> <b>Jackson, MS 39204-2206</b>		Collection account for University Physicians			<b>313.00</b>
ACCOUNT NO.  <b>University Physicians</b> <b>PO BOX 2219</b> <b>Jackson, MS 39225-2219</b>	J	Assignee or other notification for: <b>Smith Rouchon</b>			<b>219.00</b>
ACCOUNT NO.  <b>Telecheck</b> <b>5251 Westheimer</b> <b>Houston, TX 77056</b>		Notice Only			<b>0.00</b>
ACCOUNT NO.  <b>TransUnion</b> <b>PO Box 1000</b> <b>Crum Lynne, PA 19022</b>	J	Notice Only			<b>0.00</b>
ACCOUNT NO. <b>1564</b>  <b>University Hospitals &amp; Clinics</b> <b>PO Box 22547</b> <b>Jackson, MS 39225-2547</b>		Medical bill			<b>500.00</b>
ACCOUNT NO.  <b>Hollis Cobb Collection Agency</b> <b>FBO University Hospital</b> <b>PO BOX 279</b> <b>Norcross, GA 30091</b>		Assignee or other notification for: <b>University Hospitals &amp; Clinics</b>			
Sheet no. <u>5</u> of <u>6</u> continuation sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims		Subtotal (Total of this page)		\$ <b>1,032.00</b>	
		Total			
		(Use only on last page of the completed Schedule F. Report also on the Summary of Schedules, and if applicable, on the Statistical Summary of Certain Liabilities and Related Data.)			
				\$	

**SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS**  
**(Continuation Sheet)**

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER. <i>(See Instructions Above.)</i>	CODEBTOR  HUSBAND, WIFE, JOINT, OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE	AMOUNT OF CLAIM		
			CONTINGENT	UNLIQUIDATED	DISPUTED
ACCOUNT NO. <b>University Hospitals And Clinics 2500 N State St Jackson, MS 39216-4505</b>		<b>Assignee or other notification for: University Hospitals &amp; Clinics</b>			
ACCOUNT NO.					
ACCOUNT NO.					
ACCOUNT NO.					
ACCOUNT NO.					
ACCOUNT NO.					
ACCOUNT NO.					
ACCOUNT NO.					
Sheet no. <u>6</u> of <u>6</u> continuation sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims			Subtotal (Total of this page)	\$	
			Total		
		(Use only on last page of the completed Schedule F. Report also on the Summary of Schedules, and if applicable, on the Statistical Summary of Certain Liabilities and Related Data.)			
				\$	<b>17,110.00</b>

**SCHEDULE G - EXECUTORY CONTRACTS AND UNEXPIRED LEASES**

Describe all executory contracts of any nature and all unexpired leases of real or personal property. Include any timeshare interests. State nature of debtor's interest in contract, i.e., "Purchaser," "Agent," etc. State whether debtor is the lessor or lessee of a lease. Provide the names and complete mailing addresses of all other parties to each lease or contract described. If a minor child is a party to one of the leases or contracts, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

Check this box if debtor has no executory contracts or unexpired leases.

NAME AND MAILING ADDRESS, INCLUDING ZIP CODE OF OTHER PARTIES TO LEASE OR CONTRACT	DESCRIPTION OF CONTRACT OR LEASE AND NATURE OF DEBTOR'S INTEREST. STATE WHETHER LEASE IS FOR NONRESIDENTIAL REAL PROPERTY. STATE CONTRACT NUMBER OF ANY GOVERNMENT CONTRACT.

**SCHEDULE H - CODEBTORS**

Provide the information requested concerning any person or entity, other than a spouse in a joint case, that is also liable on any debts listed by the debtor in the schedules of creditors. Include all guarantors and co-signers. If the debtor resides or resided in a community property state, commonwealth, or territory (including Alaska, Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, or Wisconsin) within the eight-year period immediately preceding the commencement of the case, identify the name of the debtor's spouse and of any former spouse who resides or resided with the debtor in the community property state, commonwealth, or territory. Include all names used by the nondebtor spouse during the eight years immediately preceding the commencement of this case. If a minor child is a codebtor or a creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

Check this box if debtor has no codebtors.

NAME AND ADDRESS OF CODEBTOR	NAME AND ADDRESS OF CREDITOR

**SCHEDULE I - CURRENT INCOME OF INDIVIDUAL DEBTOR(S)**

The column labeled "Spouse" must be completed in all cases filed by joint debtors and by every married debtor, whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed. Do not state the name of any minor child. The average monthly income calculated on this form may differ from the current monthly income calculated on Form 22A, 22B, or 22C.

Debtor's Marital Status <b>Married</b>	DEPENDENTS OF DEBTOR AND SPOUSE	
	RELATIONSHIP(S): <b>Son</b> <b>Daughter</b>	AGE(S): <b>19</b> <b>10</b>
EMPLOYMENT:	DEBTOR	SPOUSE
Occupation <b>Parts Specialist</b>	<b>Patient Accounts Representative</b>	
Name of Employer <b>O'Reilly Auto Parts</b>	<b>Greenville Clinic</b>	
How long employed <b>1 years</b>	<b>2 years and 5 months</b>	
Address of Employer <b>1939 Hwy 82 East</b> <b>Greenville, MS 38701</b>	<b>1502 S Colorado St</b> <b>Greenville, MS 38701</b>	

**INCOME:** (Estimate of average or projected monthly income at time case filed)

1. Current monthly gross wages, salary, and commissions (prorate if not paid monthly) \$ **1,646.67** \$ **1,603.33**  
2. Estimated monthly overtime \$ \_\_\_\_\_ \$ \_\_\_\_\_

**3. SUBTOTAL**

4. LESS PAYROLL DEDUCTIONS

a. Payroll taxes and Social Security \$ **329.32** \$ **153.31**  
b. Insurance \$ \_\_\_\_\_ \$ **45.74**  
c. Union dues \$ \_\_\_\_\_ \$ \_\_\_\_\_  
d. Other (specify) **See Schedule Attached** \$ **254.60** \$ **208.52**  
\$ \_\_\_\_\_ \$ \_\_\_\_\_

**5. SUBTOTAL OF PAYROLL DEDUCTIONS****6. TOTAL NET MONTHLY TAKE HOME PAY**

\$ **583.92** \$ **407.57**

\$ **1,062.75** \$ **1,195.76**

7. Regular income from operation of business or profession or farm (attach detailed statement) \$ \_\_\_\_\_ \$ \_\_\_\_\_  
8. Income from real property \$ \_\_\_\_\_ \$ \_\_\_\_\_  
9. Interest and dividends \$ \_\_\_\_\_ \$ \_\_\_\_\_  
10. Alimony, maintenance or support payments payable to the debtor for the debtor's use or that of dependents listed above \$ \_\_\_\_\_ \$ **277.00**  
11. Social Security or other government assistance (Specify) \$ \_\_\_\_\_ \$ \_\_\_\_\_  
\$ \_\_\_\_\_ \$ \_\_\_\_\_  
12. Pension or retirement income \$ \_\_\_\_\_ \$ \_\_\_\_\_  
13. Other monthly income (Specify) \$ \_\_\_\_\_ \$ \_\_\_\_\_  
\$ \_\_\_\_\_ \$ \_\_\_\_\_  
\$ \_\_\_\_\_ \$ \_\_\_\_\_

**14. SUBTOTAL OF LINES 7 THROUGH 13**

\$ \_\_\_\_\_ \$ **277.00**

**15. AVERAGE MONTHLY INCOME** (Add amounts shown on lines 6 and 14)

\$ **1,062.75** \$ **1,472.76**

**16. COMBINED AVERAGE MONTHLY INCOME:** (Combine column totals from line 15; if there is only one debtor repeat total reported on line 15)

\$ **2,535.51**

(Report also on Summary of Schedules and, if applicable, on Statistical Summary of Certain Liabilities and Related Data)

17. Describe any increase or decrease in income reasonably anticipated to occur within the year following the filing of this document:  
**None**

**SCHEDULE I - CURRENT INCOME OF INDIVIDUAL DEBTOR(S)**  
**Continuation Sheet - Page 1 of 1**

	DEBTOR	SPOUSE
Other Payroll Deductions:		
401k	33.26	24.05
Child Support	217.01	
FEe	4.33	
Ins. & FSA		143.00
Other W/H		41.47

**SCHEDULE J - CURRENT EXPENDITURES OF INDIVIDUAL DEBTOR(S)**

Complete this schedule by estimating the average or projected monthly expenses of the debtor and the debtor's family at time case filed. Prorate any payments made biweekly, quarterly, semi-annually, or annually to show monthly rate. The average monthly expenses calculated on this form may differ from the deductions from income allowed on Form22A or 22C.

Check this box if a joint petition is filed and debtor's spouse maintains a separate household. Complete a separate schedule of expenditures labeled "Spouse."

1. Rent or home mortgage payment (include lot rented for mobile home) \$ **390.00**

a. Are real estate taxes included? Yes  No   
b. Is property insurance included? Yes  No

2. Utilities:

a. Electricity and heating fuel \$ **250.00**  
b. Water and sewer \$ **60.00**  
c. Telephone \$ **120.00**  
d. Other Cable \$ **75.00**  
Internet \$ **45.00**

3. Home maintenance (repairs and upkeep) \$

4. Food \$ **900.00**

5. Clothing \$ **150.00**

6. Laundry and dry cleaning \$

7. Medical and dental expenses \$ **240.00**

8. Transportation (not including car payments) \$ **425.00**

9. Recreation, clubs and entertainment, newspapers, magazines, etc. \$ **40.00**

10. Charitable contributions \$ **40.00**

11. Insurance (not deducted from wages or included in home mortgage payments)

a. Homeowner's or renter's \$  
b. Life \$  
c. Health \$  
d. Auto \$  
e. Other \$

12. Taxes (not deducted from wages or included in home mortgage payments)

(Specify) \$

13. Installment payments: (in chapter 11, 12 and 13 cases, do not list payments to be included in the plan)

a. Auto \$ **213.00**  
b. Other \$

14. Alimony, maintenance, and support paid to others \$

15. Payments for support of additional dependents not living at your home \$

16. Regular expenses from operation of business, profession, or farm (attach detailed statement) \$

17. Other **School Expenses & Activities** \$ **100.00**  
**College Tuition** \$ **100.00**

**18. AVERAGE MONTHLY EXPENSES** (Total lines 1-17. Report also on Summary of Schedules and, if applicable, on the Statistical Summary of Certain Liabilities and Related Data.)

\$ **3,148.00**

19. Describe any increase or decrease in expenditures anticipated to occur within the year following the filing of this document:

**None**

**20. STATEMENT OF MONTHLY NET INCOME**

a. Average monthly income from Line 15 of Schedule I \$ **2,535.51**  
b. Average monthly expenses from Line 18 above \$ **3,148.00**  
c. Monthly net income (a. minus b.) \$ **-612.49**

## DECLARATION CONCERNING DEBTOR'S SCHEDULES

### DECLARATION UNDER PENALTY OF PERJURY BY INDIVIDUAL DEBTOR

I declare under penalty of perjury that I have read the foregoing summary and schedules, consisting of 22 sheets, and that they are true and correct to the best of my knowledge, information, and belief.

Date: September 10, 2012

Signature: /s/ Tarris Webster

Tarris Webster

Debtor

Date: September 10, 2012

Signature: /s/ Lekia Martin Webster

Lekia Martin Webster

(Joint Debtor, if any)

[If joint case, both spouses must sign.]

### DECLARATION AND SIGNATURE OF NON-ATTORNEY BANKRUPTCY PETITION PREPARER (See 11 U.S.C. § 110)

I declare under penalty of perjury that: (1) I am a bankruptcy petition preparer as defined in 11 U.S.C. § 110; (2) I prepared this document for compensation and have provided the debtor with a copy of this document and the notices and information required under 11 U.S.C. §§ 110(b), 110(h), and 342 (b); and, (3) if rules or guidelines have been promulgated pursuant to 11 U.S.C. § 110(h) setting a maximum fee for services chargeable by bankruptcy petition preparers, I have given the debtor notice of the maximum amount before preparing any document for filing for a debtor or accepting any fee from the debtor, as required by that section.

Printed or Typed Name and Title, if any, of Bankruptcy Petition Preparer

Social Security No. (Required by 11 U.S.C. § 110.)

*If the bankruptcy petition preparer is not an individual, state the name, title (if any), address, and social security number of the officer, principal, responsible person, or partner who signs the document.*

Address

Signature of Bankruptcy Petition Preparer

Date

Names and Social Security numbers of all other individuals who prepared or assisted in preparing this document, unless the bankruptcy petition preparer is not an individual:

*If more than one person prepared this document, attach additional signed sheets conforming to the appropriate Official Form for each person.*

*A bankruptcy petition preparer's failure to comply with the provision of title 11 and the Federal Rules of Bankruptcy Procedure may result in fines or imprisonment or both. 11 U.S.C. § 110; 18 U.S.C. § 156.*

### DECLARATION UNDER PENALTY OF PERJURY ON BEHALF OF CORPORATION OR PARTNERSHIP

I, the \_\_\_\_\_ (the president or other officer or an authorized agent of the corporation or a member or an authorized agent of the partnership) of the \_\_\_\_\_ (corporation or partnership) named as debtor in this case, declare under penalty of perjury that I have read the foregoing summary and schedules, consisting of \_\_\_\_\_ sheets (total shown on summary page plus 1), and that they are true and correct to the best of my knowledge, information, and belief.

Date: \_\_\_\_\_ Signature: \_\_\_\_\_

(Print or type name of individual signing on behalf of debtor)

*[An individual signing on behalf of a partnership or corporation must indicate position or relationship to debtor.]*

*Penalty for making a false statement or concealing property: Fine of up to \$500,000 or imprisonment for up to 5 years or both. 18 U.S.C. §§ 152 and 3571.*

IN RE:

Case No. 12-13529Webster, Tarris & Webster, Lekia MartinChapter 7

Debtor(s)

**STATEMENT OF FINANCIAL AFFAIRS**

This statement is to be completed by every debtor. Spouses filing a joint petition may file a single statement on which the information for both spouses is combined. If the case is filed under chapter 12 or chapter 13, a married debtor must furnish information for both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed. An individual debtor engaged in business as a sole proprietor, partner, family farmer, or self-employed professional, should provide the information requested on this statement concerning all such activities as well as the individual's personal affairs. To indicate payments, transfers and the like to minor children, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

Questions 1 - 18 are to be completed by all debtors. Debtors that are or have been in business, as defined below, also must complete Questions 19 - 25. **If the answer to an applicable question is "None," mark the box labeled "None."** If additional space is needed for the answer to any question, use and attach a separate sheet properly identified with the case name, case number (if known), and the number of the question.

**DEFINITIONS**

**"In business."** A debtor is "in business" for the purpose of this form if the debtor is a corporation or partnership. An individual debtor is "in business" for the purpose of this form if the debtor is or has been, within six years immediately preceding the filing of this bankruptcy case, any of the following: an officer, director, managing executive, or owner of 5 percent or more of the voting or equity securities of a corporation; a partner, other than a limited partner, of a partnership; a sole proprietor or self-employed full-time or part-time. An individual debtor also may be "in business" for the purpose of this form if the debtor engages in a trade, business, or other activity, other than as an employee, to supplement income from the debtor's primary employment.

**"Insider."** The term "insider" includes but is not limited to: relatives of the debtor; general partners of the debtor and their relatives; corporations of which the debtor is an officer, director, or person in control; officers, directors, and any owner of 5 percent or more of the voting or equity securities of a corporate debtor and their relatives; affiliates of the debtor and insiders of such affiliates; any managing agent of the debtor. 11 U.S.C. § 101.

**1. Income from employment or operation of business**

**None** State the gross amount of income the debtor has received from employment, trade, or profession, or from operation of the debtor's business, including part-time activities either as an employee or in independent trade or business, from the beginning of this calendar year to the date this case was commenced. State also the gross amounts received during the **two years** immediately preceding this calendar year. (A debtor that maintains, or has maintained, financial records on the basis of a fiscal rather than a calendar year may report fiscal year income. Identify the beginning and ending dates of the debtor's fiscal year.) If a joint petition is filed, state income for each spouse separately. (Married debtors filing under chapter 12 or chapter 13 must state income of both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

AMOUNT	SOURCE
<b>33,689.00</b>	<b>2011 Income</b>
<b>34,940.00</b>	<b>2010 Income</b>
<b>25,398.64</b>	<b>2012 YTD income as of filing</b>

**2. Income other than from employment or operation of business**

**None** State the amount of income received by the debtor other than from employment, trade, profession, operation of the debtor's business during the **two years** immediately preceding the commencement of this case. Give particulars. If a joint petition is filed, state income for each spouse separately. (Married debtors filing under chapter 12 or chapter 13 must state income for each spouse whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

**3. Payments to creditors***Complete a. or b., as appropriate, and c.*

**None** a. *Individual or joint debtor(s) with primarily consumer debts:* List all payments on loans, installment purchases of goods or services, and other debts to any creditor made within **90 days** immediately preceding the commencement of this case unless the aggregate value of all property that constitutes or is affected by such transfer is less than \$600. Indicate with an asterisk (\*) any payments that were made to a creditor on account of a domestic support obligation or as part of an alternative repayment schedule under a plan by an approved nonprofit budgeting and credit counseling agency. (Married debtors filing under chapter 12 or chapter 13 must include payments by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

**b. Debtor whose debts are not primarily consumer debts:** List each payment or other transfer to any creditor made within **90 days** immediately preceding the commencement of the case unless the aggregate value of all property that constitutes or is affected by such transfer is less than \$5,850.\* If the debtor is an individual, indicate with an asterisk (\*) any payments that were made to a creditor on account of a domestic support obligation or as part of an alternative repayment schedule under a plan by an approved nonprofit budgeting and credit counseling agency. (Married debtors filing under chapter 12 or chapter 13 must include payments and other transfers by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

\*Amount subject to adjustment on 4/01/13, and every three years thereafter with respect to cases commenced on or after the date of adjustment.

**c. All debtors:** List all payments made within **one year** immediately preceding the commencement of this case to or for the benefit of creditors who are or were insiders. (Married debtors filing under chapter 12 or chapter 13 must include payments by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

#### 4. Suits and administrative proceedings, executions, garnishments and attachments

a. List all suits and administrative proceedings to which the debtor is or was a party within **one year** immediately preceding the filing of this bankruptcy case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

b. Describe all property that has been attached, garnished or seized under any legal or equitable process within **one year** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

#### 5. Repossessions, foreclosures and returns

List all property that has been repossessed by a creditor, sold at a foreclosure sale, transferred through a deed in lieu of foreclosure or returned to the seller, within **one year** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

#### 6. Assignments and receiverships

a. Describe any assignment of property for the benefit of creditors made within **120 days** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include any assignment by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and joint petition is not filed.)

b. List all property which has been in the hands of a custodian, receiver, or court-appointed official within **one year** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

#### 7. Gifts

List all gifts or charitable contributions made within **one year** immediately preceding the commencement of this case except ordinary and usual gifts to family members aggregating less than \$200 in value per individual family member and charitable contributions aggregating less than \$100 per recipient. (Married debtors filing under chapter 12 or chapter 13 must include gifts or contributions by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF PERSON OR ORGANIZATION	RELATIONSHIP TO DEBTOR, IF ANY	DATE OF GIFT	DESCRIPTION AND VALUE OF GIFT
<b>Family Worship Church 138 North Harvey Greenville, MS 38701</b>	<b>church</b>	<b>monthly</b>	<b>\$40 per month average</b>

#### 8. Losses

List all losses from fire, theft, other casualty or gambling within **one year** immediately preceding the commencement of this case **or since the commencement of this case.** (Married debtors filing under chapter 12 or chapter 13 must include losses by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

#### 9. Payments related to debt counseling or bankruptcy

List all payments made or property transferred by or on behalf of the debtor to any persons, including attorneys, for consultation concerning debt consolidation, relief under bankruptcy law or preparation of a petition in bankruptcy within **one year** immediately preceding the commencement of this case.

NAME AND ADDRESS OF PAYEE	DATE OF PAYMENT, NAME OF PAYOR IF OTHER THAN DEBTOR	AMOUNT OF MONEY OR DESCRIPTION AND VALUE OF PROPERTY
<b>Franklin Law Firm Heath Franklin 504 Main Street Suites 301-303</b>	<b>08/14/2012</b>	<b>850.00</b>

Greenville, MS 38701

**10. Other transfers**

a. List all other property, other than property transferred in the ordinary course of the business or financial affairs of the debtor, transferred either absolutely or as security within **two years** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include transfers by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

b. List all property transferred by the debtor within **ten years** immediately preceding the commencement of this case to a self-settled trust or similar device of which the debtor is a beneficiary.

**11. Closed financial accounts**

a. List all financial accounts and instruments held in the name of the debtor or for the benefit of the debtor which were closed, sold, or otherwise transferred within **one year** immediately preceding the commencement of this case. Include checking, savings, or other financial accounts, certificates of deposit, or other instruments; shares and share accounts held in banks, credit unions, pension funds, cooperatives, associations, brokerage houses and other financial institutions. (Married debtors filing under chapter 12 or chapter 13 must include information concerning accounts or instruments held by or for either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

**12. Safe deposit boxes**

a. List each safe deposit or other box or depository in which the debtor has or had securities, cash, or other valuables within **one year** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include boxes or depositories of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

**13. Setoffs**

a. List all setoffs made by any creditor, including a bank, against a debt or deposit of the debtor within **90 days** preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

**14. Property held for another person**

a. List all property owned by another person that the debtor holds or controls.

**15. Prior address of debtor**

a. If debtor has moved within **three years** immediately preceding the commencement of this case, list all premises which the debtor occupied during that period and vacated prior to the commencement of this case. If a joint petition is filed, report also any separate address of either spouse.

**16. Spouses and Former Spouses**

a. If the debtor resides or resided in a community property state, commonwealth, or territory (including Alaska, Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, or Wisconsin) within **eight years** immediately preceding the commencement of the case, identify the name of the debtor's spouse and of any former spouse who resides or resided with the debtor in the community property state.

**17. Environmental Information**

For the purpose of this question, the following definitions apply:

“Environmental Law” means any federal, state, or local statute or regulation regulating pollution, contamination, releases of hazardous or toxic substances, wastes or material into the air, land, soil, surface water, groundwater, or other medium, including, but not limited to, statutes or regulations regulating the cleanup of these substances, wastes or material.

“Site” means any location, facility, or property as defined under any Environmental Law, whether or not presently or formerly owned or operated by the debtor, including, but not limited to, disposal sites.

“Hazardous Material” means anything defined as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, or contaminant or similar term under an Environmental Law.

a. List the name and address of every site for which the debtor has received notice in writing by a governmental unit that it may be liable or potentially liable under or in violation of an Environmental Law. Indicate the governmental unit, the date of the notice, and, if known, the Environmental Law.

b. List the name and address of every site for which the debtor provided notice to a governmental unit of a release of Hazardous Material. Indicate the governmental unit to which the notice was sent and the date of the notice.

c. List all judicial or administrative proceedings, including settlements or orders, under any Environmental Law with respect to which the debtor is or was a party. Indicate the name and address of the governmental unit that is or was a party to the proceeding, and the docket number.

**18. Nature, location and name of business**

a. *If the debtor is an individual*, list the names, addresses, taxpayer identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was an officer, director, partner, or managing executive of a corporation, partner in a partnership, sole proprietor, or was self-employed in a trade, profession, or other activity either full- or part-time within **six years** immediately preceding the commencement of this case, or in which the debtor owned 5 percent or more of the voting or equity securities within **six years** immediately preceding the commencement of this case.

*If the debtor is a partnership*, list the names, addresses, taxpayer identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was a partner or owned 5 percent or more of the voting or equity securities, within **six years** immediately preceding the commencement of this case.

*If the debtor is a corporation*, list the names, addresses, taxpayer identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was a partner or owned 5 percent or more of the voting or equity securities within **six years** immediately preceding the commencement of this case.

b. Identify any business listed in response to subdivision a., above, that is "single asset real estate" as defined in 11 U.S.C. § 101.

*[If completed by an individual or individual and spouse]*

I declare under penalty of perjury that I have read the answers contained in the foregoing statement of financial affairs and any attachments thereto and that they are true and correct.

Date: September 10, 2012

Signature /s/ Tarris Webster  
of Debtor

**Tarris Webster**

Date: September 10, 2012

Signature /s/ Lekia Martin Webster  
of Joint Debtor  
(if any)

**Lekia Martin Webster**

0 continuation pages attached

*Penalty for making a false statement: Fine of up to \$500,000 or imprisonment for up to 5 years or both. 18 U.S.C. § 152 and 3571.*

IN RE:

Webster, Tarris & Webster, Lekia Martin

Debtor(s)

Case No. 12-13529

Chapter 7

## CHAPTER 7 INDIVIDUAL DEBTOR'S STATEMENT OF INTENTION

**PART A** – Debts secured by property of the estate. (*Part A must be fully completed for EACH debt which is secured by property of the estate. Attach additional pages if necessary.*)

Property No. 1	
<b>Creditor's Name:</b> Title Cash	<b>Describe Property Securing Debt:</b> 2006 Hyundai Elantra
Property will be ( <i>check one</i> ): <input type="checkbox"/> Surrendered <input checked="" type="checkbox"/> Retained	
If retaining the property, I intend to ( <i>check at least one</i> ): <input type="checkbox"/> Redeem the property <input type="checkbox"/> Reaffirm the debt <input checked="" type="checkbox"/> Other. Explain <b>Retain and pay pursuant to contract</b> (for example, avoid lien using 11 U.S.C. § 522(f)).	
Property is ( <i>check one</i> ): <input checked="" type="checkbox"/> Claimed as exempt <input type="checkbox"/> Not claimed as exempt	
Property No. 2 (if necessary)	
<b>Creditor's Name:</b> TOWER LOAN	<b>Describe Property Securing Debt:</b> Miscellaneous Household Goods and Furnishings
Property will be ( <i>check one</i> ): <input type="checkbox"/> Surrendered <input checked="" type="checkbox"/> Retained	
If retaining the property, I intend to ( <i>check at least one</i> ): <input type="checkbox"/> Redeem the property <input type="checkbox"/> Reaffirm the debt <input checked="" type="checkbox"/> Other. Explain <b>Avoid lien using 11 U.S.C. § 522(f)</b> (for example, avoid lien using 11 U.S.C. § 522(f)).	
Property is ( <i>check one</i> ): <input checked="" type="checkbox"/> Claimed as exempt <input type="checkbox"/> Not claimed as exempt	

**PART B** – Personal property subject to unexpired leases. (*All three columns of Part B must be completed for each unexpired lease. Attach additional pages if necessary.*)

Property No. 1		
<b>Lessor's Name:</b>	<b>Describe Leased Property:</b>	Lease will be assumed pursuant to 11 U.S.C. § 365(p)(2): <input type="checkbox"/> Yes <input type="checkbox"/> No
Property No. 2 (if necessary)		
<b>Lessor's Name:</b>	<b>Describe Leased Property:</b>	Lease will be assumed pursuant to 11 U.S.C. § 365(p)(2): <input type="checkbox"/> Yes <input type="checkbox"/> No

continuation sheets attached (*if any*)

I declare under penalty of perjury that the above indicates my intention as to any property of my estate securing a debt and/or personal property subject to an unexpired lease.

Date: September 10, 2012

/s/ Tarris Webster

Signature of Debtor

/s/ Lekia Martin Webster

Signature of Joint Debtor

**IN RE:**

Case No. 12-13529

Webster, Tarris & Webster, Lekia Martin

Chapter 7

Debtor(s)

**VERIFICATION OF CREDITOR MATRIX**

The above named debtor(s) hereby verify(ies) that the attached matrix listing creditors is true to the best of my(our) knowledge.

Date: September 10, 2012

Signature: /s/ Tarris Webster  
Tarris Webster

Debtor

Date: September 10, 2012

Signature: /s/ Lekia Martin Webster  
Lekia Martin Webster

Joint Debtor, if any

American Arbitration Assoc.  
1633 Broadway, 10th Floor  
New York, NY 10019

Chexsystems  
Customer Relations  
7805 Hudson Rd #100  
Saint Paul, MN 55125

Delta Phys. Practices #2  
PO Box 1734  
Greenville, MS 38704-4739

Delta Phys. Practices #3  
PO Box 1734  
Greenville, MS 38704-4739

Delta Regional Medical Center  
Bankruptcy Notice - ALL Accounts  
PO Box 1707  
Greenville, MS 38704-1707

Discount Cash Advance  
1513A Highway 1 S  
Greenville, MS 38701-7143

Equifax Information Services  
PO Box 740256  
Atlanta, GA 30374

Experian  
PO Box 2002  
Allen, TX 75013

FED LOAN SERV  
PO BOX 69184  
HARRISBURG, PA 17106

Healthcare Fin Svcs  
FBO DRMC  
911 Flynt Drive  
Flowood, MS 39232-9572

HEALTHCARE FINANCIAL S  
911 FLYNT DR  
FLOWOOD, MS 39232

HFS SVCS  
911 FLYNT DR  
FLOWOOD, MS 39232

Hollis Cobb Collection Agency  
FBO University Hospital  
PO BOX 279  
Norcross, GA 30091

Internal Revenue Service  
Special Procedure Staff  
100 W Capitol St Stop 18  
Jackson, MS 39269-1620

IRS Centralized Insolvency Operations  
PO BOX 7346  
Philadelphia, PA 19101-7346

JAMS  
1920 Main Street #300  
Foothill Ranch, CA 92614

Jeptha F Barbour IV  
FBO HFS/Delta Regional Medical Center  
441 Northpark Dr Ste C  
Ridgeland, MS 39157-5136

MS Dept Of Human Services  
Centralized Receipting And Disbursement  
PO Box 4301  
Jackson, MS 39296-4301

MS State Tax Comm  
Bankruptcy Section  
PO Box 22808  
Jackson, MS 39225

MSDHS/METSS  
750 NORTH STATE ST  
JACKSON, MS 39202

ONEMAIN FINANCIAL  
PO BOX 499  
HANOVER, MD 21076

Patient Accounts Bureau  
FBO Univ Of MS Medical Center  
PO Box 279  
Norcross, GA 30091-0279

REGIONS BANK  
PO BOX 11007  
BIRMINGHAM, AL 35288

Smith Rouchon  
1456 Ellis Ave  
Jackson, MS 39204-2206

Telecheck  
5251 Westheimer  
Houston, TX 77056

Title Cash  
1544 Hwy 1 S  
Greenville, MS 38701

TOWER LOAN  
POB 320001  
FLOWOOD, MS 39232

Tower Loan Of Greenville  
PO Box 1881  
Greenville, MS 38702-1881

TransUnion  
PO Box 1000  
Crum Lynne, PA 19022

University Hospitals & Clinics  
PO Box 22547  
Jackson, MS 39225-2547

University Hospitals And Clinics  
2500 N State St  
Jackson, MS 39216-4505

University Physicians  
PO BOX 2219  
Jackson, MS 39225-2219

US Attorney  
FBO IRS  
900 Jefferson Ave.  
Oxford, MS 38655-3608

Washington County Circuit Clerk  
2012-0285 CO  
P. O. Box 1276  
Greenville, MS 38701-3752

IN RE:

Case No. 12-13529

Webster, Tarris & Webster, Lekia Martin

Chapter 7

Debtor(s)

**DISCLOSURE OF COMPENSATION OF ATTORNEY FOR DEBTOR**

1. Pursuant to 11 U.S.C. § 329(a) and Bankruptcy Rule 2016(b), I certify that I am the attorney for the above-named debtor(s) and that compensation paid to me within one year before the filing of the petition in bankruptcy, or agreed to be paid to me, for services rendered or to be rendered on behalf of the debtor(s) in contemplation of or in connection with the bankruptcy case is as follows:

For legal services, I have agreed to accept .....	\$ <u>850.00</u>
Prior to the filing of this statement I have received .....	\$ <u>850.00</u>
Balance Due .....	\$ <u>0.00</u>

2. The source of the compensation paid to me was:  Debtor  Other (specify):

3. The source of compensation to be paid to me is:  Debtor  Other (specify):

4.  I have not agreed to share the above-disclosed compensation with any other person unless they are members and associates of my law firm.  
 I have agreed to share the above-disclosed compensation with a person or persons who are not members or associates of my law firm. A copy of the agreement, together with a list of the names of the people sharing in the compensation, is attached.

5. In return for the above-disclosed fee, I have agreed to render legal service for all aspects of the bankruptcy case, including:

- Analysis of the debtor's financial situation, and rendering advice to the debtor in determining whether to file a petition in bankruptcy;
- Preparation and filing of any petition, schedules, statement of affairs and plan which may be required;
- Representation of the debtor at the meeting of creditors and confirmation hearing, and any adjourned hearings thereof;
- Representation of the debtor in adversary proceedings and other contested bankruptcy matters;
- [Other provisions as needed]

6. By agreement with the debtor(s), the above disclosed fee does not include the following services:

**CERTIFICATION**

I certify that the foregoing is a complete statement of any agreement or arrangement for payment to me for representation of the debtor(s) in this bankruptcy proceeding.

September 10, 2012

Date

/s/ W. Heath Franklin

W. Heath Franklin 99158  
Franklin Law Firm, PLLC  
540 Main Street, Suites 301-303  
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